

## **Iowa Department of Human Services**

Terry E. Branstad Governor Kim Reynolds Lt. Governor Charles M. Palmer Director

March 13, 2014

Ajabo Kuso 6011 Creston Ave #8 Des Moines, IA 50321

Dear Ms Kuso,

| This letter is in regards to the March 13, 2014 compliance check of your Category A, Registered Chi Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit: | ld |
|--|----|
| 110.5(1)a Numbers for each child's parent, physician, and a responsible person are accessible by the phone.  | ;  |
| Program doctor's number and emergency contact into cell phone.   |    |
| 110.5(1)d Medicines are given only with written authorization from the doctor or parent.   |    |
| See form included in this mailing. This form protects you in the event a child has a poor reaction to medication.  |    |
| 110.5(1)e All accessible electrical outlets are safely capped.   |    |
| 110.5(1)m Has not less than one <b>2A 10BC</b> rated fire extinguisher in a visible and readily accessible place on each child-occupied floor.   |    |
| In addition to the one in the apartment complex's hall way, you will need one for your personal apartment. They can be purchased at places like Wal-Mart, Menards, & Home Depot. Make sure that you buy a large enough extinguisher, 2A 10 BC classification or larger. Check the box for the classification before purchase.                            |    |
| 110.5(2) A provider file is maintained and contains:   |    |
| 110.5(2)a A physician's signed statement of health and immunization status on the provider a all members of the household who may be present when children are in the home. Statements m be obtained at the time of initial registration and updated every two years.  |    |

Required to have every 2 years. Please take pages 33 and 34 of the packet left with you at the time of the spot check. Your doctor will need to complete these forms. Keep a copy for yourself and put it in a folder for easy access. Please make efforts to schedule this appointment in the next 30-45 days.

| ☐110.5(2)b During the second year of registration and each succeeding year, twelve hours of approved training. At least six hours shall be in a group setting. If the provider has documentation of completing the ChildNet, PITC, or Beyond Business Basics series, these hours may be used to fulfill two year's training requirements, not including first aid and mandatory reporter training. A specific training shall not be used to meet requirements more than one time every five years. |  |  |  |
|--|--|--|--|
| You are well on your way to completing your training hours. Please make sure that you complete the remainder of your hours by November 2014. You have 8 hours that still need completed. You can contact Child Care Resource and Referral at 1-800-722-7619 for assistance with locating trainings. There are also some trainings on page 12 which can be done online.   |  |  |  |
| 110.5(8) Children's Files  |  |  |  |
| ☐110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains:  |  |  |  |
| Please notify parents that this information is required and must be obtained for each child in your care. If this information is not on file, your daycare registration is at risk of closure or revocation.   |  |  |  |
| 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number.  |  |  |  |
| Use Page 1 of packet.  |  |  |  |
| 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency.   |  |  |  |
| Use Page 1.  |  |  |  |
| 110.5(8)c A signed medical consent from the parent authorizing emergency treatment.  |  |  |  |
| Use Page 3. This form is very important to have the parent sign. If there is a true medical emergency where the child has to be rushed to the hospital there may be issues with treating the child without this document.  |  |  |  |
| 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.   |  |  |  |

| Request from parents.  |
|--|
| 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian.   |
| Use Page 4, give to parent to have doctor sign and have parent sign also.  |
| 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually.  |
| Use Page 4, give to parent to have doctor sign and have parent sign also.  |
| 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.  |
| Use Page 4.  |
| 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.  |
| Use Page 1.  |
| ☐110.5(8)g A signed and dated immunization certificate provided by the state department of public health.  |
| Request from parent.   |
| ☐110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.   |
| Request from parent.   |
| 110.5(8)i Written permission from the parent(s) for their child to attend activities away from the child development home. It must include times of arrival and departure, destination, and person(s) responsible for the child. |
| Can be an informal written note.   |
| 110.5(8)j Injury report forms to document injuries requiring first aid or medical care.  |
| Use page 5.  |

110.8(1) SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "A"

| 110.8(2) Has three written references which at  | test to character and ability to provide child care.                                       |  |  |  |
|---|--|--|--|--|
| Add to your personal provider file where you would keep your physical, training certificates, copy of CPR card, etc. These can be obtained from parents of children you care for, neighbors, church members, friends, etc. This can be brief and informal.  |  |  |  |  |
| Non-compliance with any of the mandated regulatory cancellation or revocation of your Child Developmen steps are necessary to completely address each of correct all above-mentioned violations on or before  | nt Home Registration. Please take whatever the violations noted above. It is essential you |  |  |  |
| Based on the items out of compliance listed above, you will be required to have a re-check or follow-up visit to your home. This visit will occur on or after   |  |  |  |  |
| x Based on the items out of compliance listed above, a re-check or follow-up visit to your home is not necessary. However, it is essential you come into complete compliance with all Departmental regulatory mandates. Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section. |  |  |  |  |
| I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.   |  |  |  |  |
| Please sign and date below, and return this form in the provided envelope by: May 19, 2014.   |  |  |  |  |
|   |  |  |  |  |
| XSignature  | Date   |  |  |  |
| Please call me if you have any further questions.   |  |  |  |  |
|   |  |  |  |  |
| Sincerely,  |  |  |  |  |

## Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at (Text field for phone).

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child\_Care/Professional\_Development.html and you can sign up for training at https://ccmis.dhs.state.ia.us/trainingregistry/

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).